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June 7, 2019

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NASMHPD

Marlene H. Dortch, J.D.
Office of the Secretary
Federal Communications Commission
445 12th St. SW
Room TW-A325
Washington DC, 20554

Re: Response to the North American Numbering Council's Recommendations on the Implementation of the National Suicide Hotline Improvement Act of 2018, WC Docket No. 18-336

Dear Ms. Dortch:

The National Association of State Mental Health Program Directors (NASMHPD) is the organization representing the state executives responsible for the \$41 billion public mental health service delivery systems serving 7.5 million people annually in 50 states, 4 territories, and the District of Columbia.

NASMHPD writes to urge the Federal Communications Commission (FCC) to designate a N11 dialing code for the National Suicide Prevention and Mental Health Crisis Hotline System established under the [National Suicide Hotline Improvement Act of 2018, Pub. L. No. 115-233](#).

We recently surveyed our members and they were overwhelmingly supportive of a designated N11 dialing code specifically for mental health and suicidal crises. This consensus is aligned with SAMHSA's report to the FCC noting a "911 for the brain." The SAMHSA report concluded, "Our judgment is that an N11 national suicide prevention number has the potential to play a key role in improving national crisis intervention and suicide prevention efforts...."

According to the Centers for Disease Control and Prevention (CDC), suicide has ranked the 10th leading cause of death for all age groups in the United States since 2008. Over 47,000 Americans died by suicide in 2017—2,000 more suicides than in 2016. Suicide rates were higher for both males and females in all age groups from 10 to 74 years of age in 2017 compared to rates in 1999. SAMHSA reported in 2017 that over 9.8 million adults had serious thoughts of suicide with over 1.3 million attempting suicide.

The rising rates in suicide attempts and completions have spiraled the nation into a public health crisis. A specifically assigned N11 dialing code can change the course for many individuals in imminent suicide risk. We discourage adoption of the NANC's recommendation of a mental health crisis line being blended with an existing N11, such as 211 or 911. The 211 Support Information number is nationally established as providing general information,

referral, and linkage to community social services. The 911 Emergency Response number is designed for emergency response call takers to dispatch with police, fire, or emergency medical technicians based on the nature of the medical or criminal emergency.

A New York Magazine [article](#), published March 21, 2019, reported that New York City's 911 emergency response system received almost 180,000 calls categorized as mental health-related in 2018—a sharp rise from 97,000 calls in 2009. Further call data analysis found that in 2017, 56 percent of New York City's 911 callers categorized as mental health related were transported to hospital emergency rooms, resulting in 94,000 ER visits. In contrast, a 2018 survey of Lifeline centers reported that approximately 2 percent of calls to the National Suicide Prevention Lifeline (1-800-273-TALK) required emergency service dispatch to keep the caller safe—indicating that Lifeline's network of highly trained and certified counselors was able to reduce the emotional distress and suicidal thoughts in the majority of callers to the Lifeline.

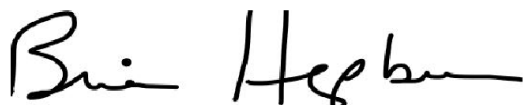
A snapshot of New York City's 911 call system demonstrates that a specifically assigned N11 dialing code for mental health and suicidal crisis would lessen the burden on local 911 emergency services systems. A designated N11 established solely for mental health and suicidal crisis would better serve the nation's public health interest. People in emotional distress and their family members need an easy-to-remember N11 that is accessible year-round, 24 hours a day, seven days a week.

The reason that we are weighing in on the NANC's recommendations is because this is a historic opportunity to improve the nation's mental health and crisis service delivery system. A designated N11 that provides responsive crisis services and diverts callers from unnecessary hospitalization is the next step in addressing the nation's rising suicide rate.

In conclusion, we encourage the FCC to specifically assign a N11 dialing code for the public to call exclusively in times of mental health and suicidal crises, and not to blend this service into the 211 infrastructure.

Thank you for considering our comments on this matter. Feel free to contact me (brian.hepburn@nasmhpd.org) if you have any further questions or comments.

Sincerely,

A handwritten signature in black ink that reads "Brian Hepburn". The signature is fluid and cursive, with the first name "Brian" and last name "Hepburn" clearly distinguishable.

Brian Hepburn, M.D.
Executive Director
National Association of State Mental Health Program Directors (NASMHPD)